

## Provider Type Added to Bed Hold

Provider type 71 Level 1 Psychiatric Hospital has been added as an acceptable provider type to bill revenue code 0183 Home Pass and 0189 Bedhold.

## Coding Q & A

**Q**

Are the behavioral health medical assessment guidelines for children and adults the same?

**A**

**No**, children are to be assessed on a more frequent basis to monitor the current condition of the child. Below are the assessment guidelines:

- Adults (18 & older) must be completed and submitted at the intake/enrollment, at a *minimum* every 12 months, and at disenrollment.
- Children (0 thru 17) must be completed and submitted at the intake/enrollment, at a *minimum* every 6 months, and at disenrollment.

**Q**

When conducting an audit on therapeutic foster care codes, what kind of documentation should you look for? Daily notes or monthly summaries?

**A**

Currently there are no set standard requirements for S5145. However, some of the documentation found when reviewing that code contained both daily notes and monthly summaries. This is an example of thorough documentation.

## !! Edit Alerts !!



An Edit Alert is a faxed and/or e-mailed notice of system enhancements or changes. The Office of Program Support strives to ensure all Edit alerts are communicated to all program participants in an accurate and reliable manner. Edit alerts will be distributed when the information is first made available and again in the following monthly publication of Tidbits.

### New/Changed Edit Alert

Tracking Number: 70

Implemented: ☒

Reference Title CRS Valid NDC Check - UPDATE

Notification Date: October 2, 2007

Expected Implementation Date: October 1, 2007  
ADHS will provide 90 days notice when possible

Change Description: A CRS preprocessor check of NDC code against 1st Data Bank will be added. If NDC code is not valid, encounter will be rejected with error message "NDC is invalid or obsolete." (SSR 2181)

A CRS preprocessor check of NDC code against 1<sup>st</sup> data bank will be added. If NDC code is not valid, encounter will be rejected with error message "NDC is invalid or obsolete."

### New/Changed Edit Alert

Tracking Number: 91

Implemented: ☒

Reference Title CRS Place of Service Address - UPDATE

Notification Date: October 2, 2007

Expected Implementation Date: October 1, 2007  
ADHS will provide 90 days notice when possible

Change Description: Currently there is a level 2 (soft) edit in CRS stating that the, "Service address can not be a P. O. Box." With the implementation of the AHCCCS Validator, these encounters are being rejected when sent to AHCCCS. ADHS will be changing the CRS edit to level 1, to reject the encounters and not allow them into the CRS system.

Currently, there is a level 2 (soft) edit in CRS stating that the, "Service address can not be a P.O. Box." With the implementation of the AHCCCS validator, these encounters will be rejected when sent to AHCCCS. ADHS will be changing the CRS edit to a level 1, to reject the encounters and not allow them into the CRS system.

## New/Changed Edit Alert

Tracking Number: 92

Implemented: ☒

Reference Title CRS DRG Code Added - UPDATE

Notification Date: October 9, 2007

Expected Implementation Date: October 5, 2007  
ADHS will provide 90 days notice when possibleChange Description: DRG code 524, Transient Ischemia, has been added to the CRS DRG code table (H97DRG\_CODES).  
(SSR 2331)

The CRS Sites may resubmit encounters with this code that have been rejected for BT000077, DRG Code Invalid for Bill Type 11X.

DRG Code 524, Transient Ischemia, has been added to the CRS DRG code table. CRS may resubmit encounters with this code that have been rejected for BT000077: DRG code invalid for bill type 11X.

## New/Changed Edit Alert

Tracking Number: 93

Implemented: ☐

Reference Title Revenue code to Procedure code check

Notification Date: October 17, 2007

Expected Implementation Date: January 17, 2008  
ADHS will provide 90 days notice when possible

Change Description: BHS will add an edit check to verify that procedure codes submitted on inpatient and outpatient UBs are valid for the revenue codes they are submitted with. (SSR 2339)

BHS will add an edit check to verify that procedure codes submitted on inpatient and outpatient UBs are valid for the revenue codes they are submitted with.

## New/Changed Edit Alert

Tracking Number: 94

Implemented: ☒

Reference Title Date of Death

Notification Date: October 18, 2007

Expected Implementation Date: October 18, 2007  
ADHS will provide 90 days notice when possible

## Change Description:

(SSR 1769) AHCCCS is sending the date of death on deceased clients on the AHCCCS behavioral health eligibility Daily Response File. Records containing a date of death are identified by a "DE" in the CHG-RSN field and an "X" in the MATCH-IND field. The date of death will be reported on these records as follows:

If the client had an open behavioral health eligibility segment at the time of death, AHCCCS will send the date of death in the FYI-END-DAT-1 field, with a MSG-CD-1 of 24. The other date fields will be blank. Example - Client had an open eligibility segment beginning 8/1/2007, his date of death is 8/15/2007, AHCCCS would send:

CHG-RSN	MATCH-IND	MSG-CD-1	FYI-BEG-DAT-1	FYI-END-DAT-1	MSG-CD-2	FYI-BEG-DAT-2	FYI-END-DAT-2
DE	X	24 (term)		8/15/2007			

If the client's date of death is in the middle of a closed behavioral health eligibility segment, AHCCCS will inactivate the existing segment and add a new segment to with the date of death in the FYI-END-DAT-2 field, with a MSG-CD-2 of 21. Example - Client had an eligibility segment of 8/1/2007 through 8/31/2007, his date of death is 8/15/2007, AHCCCS would send:

CHG-RSN	MATCH-IND	MSG-CD-1	FYI-BEG-DAT-1	FYI-END-DAT-1	MSG-CD-2	FYI-BEG-DAT-2	FYI-END-DAT-2
DE	X	23 (inactivate)	8/1/2007	8/31/2007	21 (add)	8/1/2007	8/15/2007

AHCCCS is sending the date of death on deceased clients on the AHCCCS behavioral health eligibility Daily Response File. Records containing a date of death are identified by a "DE" in the CHG-RSN field and an "X" in the MATCH-IND field.

## New/Changed Edit Alert

Tracking Number: 95

Implemented: ☐

Reference Title Viagra Edit - UPDATE

Notification Date: November 1, 2007

Expected Implementation Date: ASAP  
ADHS will provide 90 days notice when possible

## Change Description:

Effective immediately CRS contractors should no longer be prescribing Viagra. ADHS will be adding an edit to reject future Viagra encounters. (SSR 2351)

Although CRS contractors may no longer prescribe Viagra, they may continue to prescribe PDE5 inhibitor Revatio for treatment of pulmonary arterial hypertension.

Effective immediately, CRS contractors should no longer be prescribing Viagra. ADHS will be adding an edit to reject future Viagra encounters. Although CRS contractor may no longer prescribe Viagra, they may continue to prescribe PDE Inhibitor Revatio for treatment of pulmonary arterial hypertension.

## New/Changed Edit Alert

Tracking Number: 96

Implemented: ☐

Reference Title Validator edits

Notification Date: October 30, 2007

Expected Implementation Date: ASAP  
ADHS will provide 90 days notice when possible

## Change Description:

The following edits will be added as a result of the implementation of the AHCCCS Validator:

1. An edit to verify that the zip code submitted on the intake is valid (SSR 2355)
2. Edit checks on all diagnosis code fields to verify code is valid on date of service. (SSR 2354)
3. An edit to reject 1500 encounters if no admission date is present, when submitted with a place of service. (SSR 2353)
  - 21 - Inpatient Hospital
  - 51 - Inpatient Psychiatric Facility
  - 52 - Psych Facility/Partial Hospitalization
  - 55 - Residential Substance Abuse Treatment Facility
  - 56 - Psychiatric Residential Treatment Center
4. An edit to check for duplicate diagnosis codes on the same encounter. (SSR 2352)

As a result of the implementation of the AHCCCS Validator, four new edits have been put in place.

- An edit to verify that the zip code submitted on the intake is valid.
- Check all diagnosis code fields to verify code is valid on date of service.
- Reject 1500 encounters if no admission date is present, when submitted with specific places of service. (Places of service found on the edit alert)
- Check for duplicate diagnosis codes on the same encounter.

## AHCCCS Code Changes

### Modifier(s)

Effective for dates of service on or after July 1, 2005 the CPT codes below can be reported with the GO (Services delivered under OP OCC therapy) modifier.

97597 (Removal Of Devitalized Tissue From Wound(s), Selective)

97598 (Removal Of Devitalized Tissue From Wound(s), Selective)

Effective for dates of service on or after July 1, 2005 the CPT codes below can be reported with the GO (Services delivered under OP OCC therapy) and GP (Services delivered under an outpatient physical therapy plan) modifiers.

- 97602 (Removal Of Devitalized Tissue From Wound(S), Non-Select)
- 97605 (Negative Pressure Wound Therapy (Eg, Vacuum Assisted Dr)

Effective for dates of service on or after July 1, 2005 the following CPT codes can be reported with modifier GP (Services delivered under outpatient physical therapy):

- 97597 Removal of devitalized tissue from wound(s), selective debridement, without anesthesia (e.g., high pressure water jet with/without suction, sharp selective debridement with scissors, scalpel and forceps), with or without topical application(s) wound assessment, and instructions(s) for ongoing care, may include use of whirlpool, per session, total wound(s) surface area less than or equal to 20 square centimeters.
- 97598 Removal of devitalized tissue from wound(s), selective debridement, without anesthesia (e.g. high pressure water jet with/without suction, sharp selective debridement with scissors, scalpel and forceps), with or without topical application(s), wound assessment, and instruction(s) for ongoing care, may include use of a whirlpool, per session, total wound(s) surface area greater than 20 square centimeters

### Age Change

Effective for dates of service on or after September 24, 2007 the CPT code 90649 (Human Papilloma Virus (HPV) Vaccine, Types 6, 11, 16, 18) maximum age changed to 26 and limit of 3 per lifetime.

Effective for dates of service on or after October 1, 2005 the ICD-9 diagnosis code V12.61 (Personal history, pneumonia (recurrent)) Minimum age has changed from 021 to 000

### Medicare Indicator:

Effective with dates of service on or after August 21, 2007 the CPT code 99291 (Critical care, evaluation and management of critically ill or critically injured patient, first 30-74 minutes) has a Medicare coverage code of "Y" (covered Medicare service).

## How to Identify Valid Diagnosis Codes in PMMIS

The Office of Program Support (OPS) has recently identified that the following Diagnosis Codes are no longer valid:

- **780.9** (Other general symptoms) – End dated 12/31/2002
- **995.2** (Other & unspecified adverse effect of drug, medicinal & biological substance) – End dated 9/30/2006

OPS had previously advised the sites to identify valid diagnosis codes on PMMIS screen RF724 (Standard Service Set):

TR: RF724 ACT: I		AHCCCS - REFERENCE		10/29/07	
NTR: _____		STANDARD SERVICE SET		10:33:26	
				RF07L003	
START AT SERVICE: _____		SVC TYPE: _____		ENT TYPE: _____	
		BEG DAT: _____		END DAT: _____	
		FROM: _____		TO: _____	
SVC TYPE	ENTITY TYPE	SERVICE CODE BILLABLE FROM	SERVICE CODE BILLABLE TO	ENT IND	CODE RANGE EFFECTIVE BEGINNING DATE
D	MHS	78009	78009	B	01/01/1997 99/99/9999
D	MHS	78050	78050	B	01/01/1997 99/99/9999
D	MHS	78052	78052	B	10/01/1991 99/99/9999
D	MHS	78054	78054	B	10/01/1991 99/99/9999
D	MHS	78059	78059	B	10/01/1991 99/99/9999
D	MHS	7809	7809	B	10/01/1991 99/99/9999
D	MHS	7876	7876	B	10/01/1991 99/99/9999
D	MHS	7999	7999	B	10/01/1991 99/99/9999
D	MHS	9952	9952	B	10/01/1991 99/99/9999
PF: 1=HLP 2=RTN 3=CLR 4=MSG		7=UP 8=DWN		10=TOP 11=BOT 12=ESC	

This screen **should** be referenced *first* to determine if a Diagnosis Code is valid. For example, behavioral health services would be diagnosis codes with an "Entity Type" of MHS. If that Entity Type was there that

code would be valid for use as the Primary Diagnosis on a Behavioral Health encounter or claim.

Once the Diagnosis Code has been identified on PMMIS screen RF724, the T/RBHAs should look up the Diagnosis Code on PMMIS screen RF211 (Diagnosis AHCCCS Coverage):

TR: RF211 ACT: I	AHCCCS - REFERENCE	10/29/07
NTR: _____	DIAGNOSIS AHCCCS COVERAGE	10:45:09
		RF02L005
DIAGNOSIS CODE: <b>780.9</b> BEG DAT 10/01/1982 END DAT: 99/99/9999 STATUS: C		
DIAGNOSIS DESCRIPTION: OTHER GENERAL SYMPTOMS		
START AT CODE: ____ BEG DAT: _____ END DAT: _____		
COVERAGE CODE	AHCCCS COVERAGE DESCRIPTION	EFFECTIVE BEGINNING DATE
01	COVERED SERVICE/CODE AVAILABLE	10/01/1982
		<b>EFFECTIVE ENDING DATE</b>
		<b>12/31/2002</b>
PF: 1=HLP 2=RTN 3=CLR 4=MSG 7=UP 8=DWN 10=TOP 11=BOT 12=ESC		

Once the Diagnosis Code has been entered, the site will be able to identify the date span in which the Diagnosis Code is available for use. In the example above, the Diagnosis Code is valid for dates of service 10/01/1982 – 12/31/2002. This Diagnosis Code **should not** be used for any encounter or claim with dates of service after 12/31/2002. AHCCCS uses a generic “Effective Ending Date” of “99/99/9999” to identify a Diagnosis Code that is valid for use. Please contact your assigned Office of Program Support Representative if further clarification is necessary on this matter.

## The NPI is here. The NPI is now. NPES Data & New Data Dissemination Training Module Now Available!

The NPI Registry and the downloadable file are now available. To view the Registry, visit <https://npes.cms.hhs.gov/NPES/NPIRegistryHome.do> on the web. The downloadable file is available at [http://npesdata.cms.hhs.gov/cms\\_NPI\\_files.html](http://npesdata.cms.hhs.gov/cms_NPI_files.html) on the web.

Additionally, the final module in the NPI Training Package is now available. Module 4, Data Dissemination, is now available at [http://www.cms.hhs.gov/NationalProvIdentStand/Downloads/NPI\\_Module4\\_Data\\_Dissemination.pdf](http://www.cms.hhs.gov/NationalProvIdentStand/Downloads/NPI_Module4_Data_Dissemination.pdf) on the CMS website. This module describes the policy by which CMS will make certain NPES data available, as well as the data CMS is disclosing.

As always, more information and education on the NPI can be found through the CMS NPI page [www.cms.hhs.gov/NationalProvIdentStand](http://www.cms.hhs.gov/NationalProvIdentStand) on the CMS website.

## CRS Encounter Production Schedule – Key Dates and Events

FTP Processing Activities Contractor Submission Deadlines:	Oct 2007	Nov 2007	Dec 2007	Jan 2008	Feb 2008	Mar 2008
1. Deadline for New Day Encounter File Submission to ADHS/CRSA - Monday at 12:00 P.M.	Fri 09/28/07 12:00 PM	Mon 11/05/07 12:00 PM	Mon 12/03/07 12:00 PM	Mon 12/31/07 12:00 PM	Mon 02/04/08 12:00 PM	Mon 03/03/08 12:00 PM
2. Deadline for corrected <u>Pend</u> Encounters	Fri 09/28/07 12:00 PM	Fri 11/02/07 12:00 PM	Fri 11/30/07 12:00 PM	Fri 12/28/07 12:00 PM	Fri 02/01/08 12:00 PM	Fri 02/29/08 12:00 PM
3. New Day & Corrected <u>Pends</u> due to AHCCCS (12 noon)	Thurs 10/04/07 12:00 PM	Thurs 11/08/07 12:00 PM	Thurs 12/06/07 12:00 PM	Thurs 01/03/08 12:00 PM	Thurs 02/07/08 12:00 PM	Thurs 03/06/08 12:00 PM
<b>AHCCCS Processing</b>						
Files available from AHCCCS (5pm)	Mon 10/15/07	Fri 11/16/07	Fri 12/14/07	Fri 01/11/08	Fri 02/15/08	Fri 03/14/08
Pended & Adjudicated Encounters Available to CRS Regional Contractors by 5:00 p.m.	Tues 10/16/07	Mon 11/19/07	Mon 12/17/07	Mon 01/14/08	Mon 02/18/08	Mon 03/17/08

Note: Any date change on the part of AHCCCS will result in a ADHS date change.

## BHS Encounter Production Schedule Key Dates and Events

FTP Processing Activities Contractor Submission Deadlines:	Oct 2007	Nov 2007	Dec 2007
Run H74603 New Day	09/24/07	10/26/07	11/28/07
Deadline for RBHA <u>pend</u> corrections to OPS	09/28/07	10/31/07	11/30/07
OPS submit RBHA <u>pend</u> correction & deletes to IT by 11 a.m.			
Run H74609 Create <u>Pend</u> correction file for AHCCCS	10/01/07	11/01/07	12/01/07
New Day & Corrected <u>Pends</u> due to AHCCCS (12 noon)	Thurs 10/04/07	Thurs 11/08/07	Thurs 12/06/07
<b>AHCCCS Processing</b>			
Files available from AHCCCS (5pm)	Mon 10/15/07	Fri 11/16/07	Fri 12/14/07
Receive AHCCCS notification			
Run H74614 <u>Pend</u> Reset			
Run H74607 <u>Pend</u> Load	Tues 10/16/07	Mon 11/19/07	Mon 12/17/07
Run H74611 Adjudication			
Cycle Completed – Files available from BHS			

Note: Any date change on the part of AHCCCS will result in a ADHS date change.

## DES Contact Number

For any changes in member enrollment (i.e. name changes, demographic changes, etc.)

### DES Communications Center

Maricopa County: (602) 542-9935  
Statewide: 1-800-352-8401



## Security IDs for All BHS Secure Systems

Any person, needing access to the PMMIS system, must submit the required paperwork and use the individual ID assigned from AHCCCS Data Security during the registration process. Under no circumstance should there be any 'sharing' of user names and/or passwords. Currently there is no limit (within reason) on the number of users available to the sites; individual providers are not authorized access to PMMIS through the Division.

The Office of Program Integrity must authorize all requests for access to CIS, Office of Human Rights, Office of Grievance and Appeals, Issue Resolution System, and PMMIS (AHCCCS) databases. In order to obtain access to any of these databases, please fax or mail a copy of the appropriate User Access Request Form, User Affirmation Statement, or Confidentiality Agreement to Stacy Mobbs at (602) 364-4736.

If you have any questions, please contact Stacy Mobbs by telephone at (602) 364-4708 or by e-mail at [mobbss@azdhs.gov](mailto:mobbss@azdhs.gov).



## Who Do I Call??

If you need assistance please contact your assigned T/RBHA Representative:

Eunice Argusta	Gila River Navajo Nation Pascua Yaqui	(602) 364-4526 <a href="mailto:arguste@azdhs.gov">arguste@azdhs.gov</a>
Javier Higuera	CPSA 26 & 27 Tucson CRS	(602) 364-4715 <a href="mailto:higuerj@azdhs.gov">higuerj@azdhs.gov</a>
Gary Szymanski	Magellan ValueOptions	(602) 364-4677 <a href="mailto:szymang@azdhs.gov">szymang@azdhs.gov</a>
Renee Chavez	NARBHA	(602) 364-4734 <a href="mailto:chavezr@azdhs.gov">chavezr@azdhs.gov</a>
Jerri Gray	Cenpatico 02 & 22	(602) 364-1479 <a href="mailto:grayj@azdhs.gov">grayj@azdhs.gov</a>
Kevin Gibson	Flagstaff CRS Yuma CRS	(602) 364-4727 <a href="mailto:gibsonk@azdhs.gov">gibsonk@azdhs.gov</a>
Dustin Jackson	Phoenix CRS	(602) 364-4711 <a href="mailto:jacksod@azdhs.gov">jacksod@azdhs.gov</a>

## Reporting Program Fraud and Abuse

If you need assistance or to report an incident of suspected Fraud, Waste, and/or Abuse, please contact us at:

Tim Stanley	Manager	(602) 364-4781	<a href="mailto:stanleti@azdhs.gov">stanleti@azdhs.gov</a>
Stacy Mobbs	Auditor	(602) 364-4708	<a href="mailto:mobbss@azdhs.gov">mobbss@azdhs.gov</a>
Sandra Reyes	Auditor	(602) 364-4426	<a href="mailto:reyess@azdhs.gov">reyess@azdhs.gov</a>

If you wish to remain anonymous, you may make a report through our Fraud and Abuse Hotline at 602 364-3758 (locally) or 1 866 569-4927 (toll free) or email at [ReportFraud@azdhs.gov](mailto:ReportFraud@azdhs.gov).

If you prefer, you may write at:

Tim Stanley, Manager, Office of Program Integrity  
Arizona Department of Health Services  
Office of the Deputy Director  
150 N. 18th Avenue, Suite 280  
Phoenix, Arizona 85007

## ADHS Encourages Electronic Claims

The Arizona Department of Health Services requests all CRS Sites and RBHAs to encourage their providers to submit claims electronically. The benefits of electronic claim submissions are:

- Faster claims processing
- More accurate claims entry
- Less expensive than manual data entry